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FROM: [REDACTED]
CITE: [REDACTED]
O: [REDACTED]

REC'D - CIVIL RIGHTS
GEORGE WALLACE
OFFICE OF THE GOVERNOR
BIRMINGHAM, ALA.

Department/Court: Public Safety Group

Division/Unit: Office of Emergency Services

2. VOLUNTEER PROGRAM BENEFITS:

- a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc.)

No. Vol.	5	Hours	2032.50	X	\$16.05	=	\$32,621.63
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Types of work performed by GENERAL VOLUNTEERS in this category:

Resource Manual, Dam Plans, County Plan, DSW Data Base

- b. INSTITUTIONAL VOLUNTEERS (this section should include court referrals, honor camp inmates, PIC/RETC, GAIN, etc.)

No. Vol.	0	Hours	0	X	\$16.05	=	\$0.00
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Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

- c. **SPECIALIZED VOLUNTEERS** (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels [VCL]. If you have such a volunteer, please indicate the position, hours and compensation level below.)

<u>Position</u>	<u>Hours</u>	X	<u>VCL</u>	=	<u>Dollar Benefit</u>
					\$0.00
					\$0.00

No.	Vol.	0	Total Hours	0	Total Value	\$0.00
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[illegible]

Types of work performed by SPECIALIZED VOLUNTEERS in this category:

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

<u>No. of Volunteers</u>	<u>Hours</u>	<u>Dollar Benefit</u>
<u>5</u>	<u>2033</u>	<u>\$32,622</u>
<u>0</u>	<u>0</u>	<u>\$0</u>
<u>0</u>	<u>0</u>	<u>\$0</u>

TOTALS:	5	Total Hours	2033	Total Value	\$32,621.63
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3. DONATIONS TO VOLUNTEER PROGRAM:

Please list all donations to the department's Volunteer Program including monetary donations and tangible/intangible items. Items such as computers, air time, transportation, books, etc. Please assign a fair market value to each and add to the total value of the donations section.

Item Donated: _____ Value: _____

Item Donated: _____ Value: _____

Item Donated: _____ Value: _____

Item Donated: _____ Value: _____

TOTAL VALUE = \$0.00

4. VOLUNTEER PROGRAM COSTS:

a.

Cost of direct supervision of Volunteers (total hours of direct supervision multiplied by the hourly rate of staff person[s] directly supervising program volunteers.)

Hours X Rate

\$0.00

b. Cost of program coordination (total hours of program coordination multiplied the hourly rate of coordinator[s]). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placement, recognition, etc.)

Hours 0 X Rate

\$0.00

\$0.00

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c. Other program costs (training materials/supplies, recognition costs, etc.):

Item : Volunteer Travel Reimbursement Cost: \$2,609.86

Item : _____ Cost: _____

Item : _____ Cost: _____

TOTAL OF OTHER PROGRAM COSTS =

\$2,609.86

d. TOTAL OF PROGRAM COST (4a+4b+4c) =

\$2,609.86

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a Total Dollar Benefits of Volunteers, Item 2d **\$32,621.63**

b. Total of Donations to Volunteer Program, Item 3 **\$0.00**

c. Subtract Total of program Costs, Item 4d **\$2,609.86**

TOTAL PROGRAM BENEFIT:

\$30,011.77

6. **RECRUITING:**

Please describe your recruiting programs:

7. **SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:**

Please describe any special activities and/or achievements your program was involved in during the period of this report:

8. **VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2001-02:**

Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

9. **GENERAL INFORMATION:**

Name of person completing report:

Richard Gross

Phone:

(858) 715-2211

Mail Stop: 025

E-Mail:

richard.gross@sdcounty.ca.gov

Volunteer Coordinator:

Richard Gross

Phone:

(858) 715-2211

Mail Stop: 025

E-Mail:

richard.gross@sdcounty.ca.gov

10. **DEPARTMENT CERTIFICATION:**



Willard C. Lewis

DEPARTMENT HEAD SIGNATURE



05/19/03

DATE

05/19/03